

P950005386

ACCREDITED FINANCIAL ACCOUNTING, INC.
2430 Shadowlawn Drive
Suite Seven
Naples, FL 33962
941-775-8588

July 07, 1995

Secretary of State
Div. of Corporations
P.O. Box 6327
Tallahassee, FL 32314

700001538617
-07/11/95--01001--004
*****70.00 *****70.00

Re: Different Strokes Of S.W. Fla., Inc.

Enclosed please find the Articles of Incorporation for
Different Strokes Of S.W. Fla., Inc.

A Check for \$70.00 is enclosed. Please return to us the charter
number for the corporation. We do not require a certified copy.

Sincerely yours,

Glenn A. Morton

Glenn A. Morton, E.A.

PAID 7-17
EFFECTIVE DATE
7-7-95

ARTICLES OF INCORPORATION
OF
DIFFERENT STROKES OF S.W. FLA., INC.

The undersigned subscriber to the Articles of Incorporation, being a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I

Name

The name of this corporation is:

Different Strokes Of S.W. Fla., Inc.
2127 River Reach Drive #524
Naples, Fl. 33940

ARTICLE II

GENERAL NATURE OF BUSINESS

This corporation is organized for the purpose of transacting any and/or all lawful business under the General Corporation act of the Florida Statutes.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 500 shares of One Dollar (\$1.00) par value common stock.

EFFECTIVE DATE
7-7-98

ARTICLE IV

PREEMPTIVE RIGHTS

Each shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which they already hold, shall have the right to purchase their pro rata share thereof at the price at which it is offered to others.

ARTICLE V


DURATION

This corporation is to exist perpetually.

ARTICLE VI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 2127 River Reach Drive, #524, Naples, Fl 33942 and the name of the initial registered agent of this corporation at that address is Avi Alias. I am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Signed: 
Avi Alias

ARTICLE VII
INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may never be less than one. The names and addresses of the initial director of this corporation are as follows:

NAME	ADDRESS
Avi Alias	2127 River Reach Drive #524 Naples, Fl. 33942

ARTICLE VIII
INCORPORATOR

The name and address of the person subscribing these articles is:

NAME	ADDRESS
Avi Alias	2127 River Reach Drive #524 Naples, Fl. 33942

ARTICLE IX
AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment thereto, in the manner provided by law, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE X

INDEMNIFICATION

The corporation shall indemnify any officer and/or director, or any former officer and/or director to the full extent of the law.

ARTICLE XI

EFFECTIVE DATE

These Articles of Incorporation shall be effective upon the date of subscription and acknowledgement.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles on the SEVENTH day of JULY 1995.



Avi Alias

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this SEVENTH of JULY 1995 by Avi Alias.



Notary Public

State of Florida at Large



E. FRANCES MORTON
State of Florida
My Comm. Exp. June 3, 1998
Comm. # CC 382668

☒ PERSONALLY KNOWN BY ME
☐ PRODUCED I.D.

995000053861

DIFFERENT STROKES, INC.
150 HUNTINGTON DRIVE UNIT 15 305
NAPLES, FLORIDA 33942

10/1/91
***** 2,000 ***** 2,000

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

10/1/91 GAVE
AUTHORIZATION BY PHONE TO
CORRECT date of adoption
DATE 10/1/91
DOC. EXAM 10/1/91

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

Different Strokes of S.W. Fla., Inc. _____
(Present Name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: An Officer and Director being added:

Avi Allas (As President)
150 Huntington Drive Unit B-303
Naples, Florida 33942

SECOND: An Officer and Director being added:

Alan Jackson (As Vice-President)
150 Huntington Drive Unit B-303
Naples, Florida 33942

THIRD: An Officer and Director being added:

Rudy Mijangos (As Treasurer)
150 Huntington Drive Unit B-303
Naples, Florida 33942

FOURTH: The Address of its Registered office will be 150 Huntington Drive Unit B-303, Naples, Florida 33942. Pager Number: (941)-890-6009. Or Phone Number (941) 649-4840.

FIFTH Adoption of Amendment(s) (check one)

_____ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

_____ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of Votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

_____ The amendment(s) was/were adopted by the Board of Directors without shareholder action and shareholder action was not required.

X The amendment(s) was/were adopted by the incorporators ^{on September 15, 1995} without shareholder action and shareholder action was not required.

Signed this 15th day of September, 1995.

Signature Avi Alias President
(By the Chairman or Vice Chairman of the Board,
Directors, President or other officer if adopted by the
Shareholders)

OR
(By a director if adopted by the directors)
OR
(By an incorporator if adopted by the incorporators)

AVI ALIAS President/Incorporator

Type of Print Name

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Gordon H. Mendenhall
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 137-10000-3861
1. Copyright Notice
DIFFERENT STROKES, INC.
150 HUNTINGTON DRIVE UNIT B-305
NAPLES, FLORIDA 34109

150 HUNTINGTON DRIVE UNIT B-305
NAPLES, FLORIDA 34109

1996 OCT 29 PM 3: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

21 Principal Place of Business		26 Mailing Address		31 Date of Last Report or Qualified		36 Date of Last Report	
21 Suite Apt # etc.		26 Suite Apt # etc.		31 07/01/95		36 10/10/95	
22 City & State		27 City & State		32 Filer's Name		37 Applied For	
23 Zip		28 Zip		32 65-0591531		37 Not Applicable	
24 Country		29 Country		33 Certificate of Status Desired <input type="checkbox"/>		38 \$8.75 Additional Fee Required	
25 U.S.A.		30		34 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		39 \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent							
Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
10. This corporation has liability for intangible tax under s. 199.032.							

AVI ALIAS
150 HUNTINGTON DRIVE UNIT R-305
NAPLES, FLORIDA 34109

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City

51	05	2, Soda
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11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

SIGNATURE:  401 ALIAS

10/25/96

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	
NAME	Avi Alias	12 NAME	
STREET ADDRESS	150 Huntington Dr. Unit B-305	13 STREET ADDRESS	900002000849--7
CITY-ST-ZIP	Naples, Fl. 34109	14 CITY-ST-ZIP	-11/08/96--01098--002
	<input type="checkbox"/> DELETE		****313.75 ****313.75
TITLE	T	21 TITLE	
NAME	Rudy Mijangos	22 NAME	
STREET ADDRESS	150 Huntington Drive Unit B-305	23 STREET ADDRESS	900002000849--7
CITY-ST-ZIP	Naples, Florida 34109	24 CITY-ST-ZIP	-11/08/96--01098--003
	<input type="checkbox"/> DELETE		****61.25 ****61.25
TITLE		31 TITLE	VP
NAME		32 NAME	Adonay Ledezma
STREET ADDRESS		33 STREET ADDRESS	150 Huntington Dr. Unit B-305
CITY-ST-ZIP		34 CITY-ST-ZIP	Naples, Florida 34109
	<input type="checkbox"/> DELETE	41 TITLE	
TITLE		42 NAME	
NAME		43 STREET ADDRESS	
STREET ADDRESS		44 CITY-ST-ZIP	
CITY-ST-ZIP		51 TITLE	
	<input type="checkbox"/> DELETE	52 NAME	
TITLE		53 STREET ADDRESS	
NAME		54 CITY-ST-ZIP	
STREET ADDRESS		61 TITLE	
CITY-ST-ZIP		62 NAME	
	<input type="checkbox"/> DELETE	63 STREET ADDRESS	
TITLE		64 CITY-ST-ZIP	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation, or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 as required or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/96

(941) 643-1135